UNION COUNTY ALCOHOL LICENSING EMPLOYEE APPLICATION FOR ALCOHOLIC BEVERAGE PERMIT

BACKGROUND CHECK CONSENT FORM

Ву

Date

Fee Received: M.O. Cash Samount Certified check

certified cl be availab	heck payable le for fingerp	\$ <u>57.00 (or \$10 if a rer</u> to Union County must rinting, photographing t bring a valid governm	accompany this for and such other inv	m. Each employ estigation as ma	ee must
Agency Req	uesting History	: <u>Union County Alcoho</u>	l Board		
(Print) Full	Name:				
Address:Street		City/S	State	Zip Code	
Home Phon	e Number:	SS#			
Sex:	Race:	Date of Birth	Height:	Weight	
Hair:	Eye:	City & State of Birth:			
Employer:Phone No. w/Area Code:					
Address of	Employer:				
signed, con dersigned v	iduct a backgro vhich may be in	reby authorize the Union bund investigation, including the files of any state, fective Union County Commis	ing criminal history re deral or local criminal	ecord, pertaining to	o the un-
Signature of Applicant		Date			
		Instru	ictions:		
		Take t	this form to the Sheriff's	Dept. (378 Beasley S	Street)
Signed in the presence of:			Call first for an appointment—706-439-6080—Ask for Sta Sgt. Susan Rhodes.		for Staff
Notary Public			Fingerprinting is only done on Monday, Tuesday, Thursday and Friday between 9 and 4 pm.		hursday,
My Commission Expires:		be con	After the report comes back from the Sheriff's Dept. you be contacted to go to the Fire Dept. to have your alcohol mit card made.		
Notary Seal Form #4 7/1	0/2013				